

Work Order ID 78024

78024

Page 1

December-23-11 10:04:58 AM

Item ID: D212-664-101

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Fwd

Start Date: 23/12/2011 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/01/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 11/12/23 Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D212-664-141	Rev D (DEO)								
100		0.00							
100	DOCUMENT CONTROL								
DC	Memo	0.00							
Document Control	Photocopy bluefile and create labels as per PPP D212-664-101 CHG005								
110		0.00							
110	Pick Kit								
Packaging	Packaging								
Packaging	Memo	0.00							
120		0.00							
120	BENDING MACHINE - CROSSTUBES								
CNC Bend 2	Memo	0.00							
CNC Alpha 160 Bender	Bend tube as per Dwg D212-664-141 using CNC bender program 212-fw and Folio D212-664-101								

MLJ 12-1-11

8/2/01/01

MO

11-12-28

JW
MO

11-12-28

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78024***78024***

Page 2

December-23-11 10:04:58 AM

Item ID: D212-664-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 23/12/2011 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 17/01/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

130

QC15- Crosstube Dimensional Check

0.00

130

QC

Memo

0.00

Quality Control

140

140

Crosstubes

Crosstubes

0.00

Crosstubes

Memo

0.00

1-Drill pilot holes in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549, using drill table DT8577, set-up towers in hole #7 as per QSI 10

2-Ream hole to finish size in tube as per Dwg D212-664-141 using drill Jig DT8548 & DT8549. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.

3-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-141

4-Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D212-664-141

(XL)

MO

11-12-28

MO

11-12-29

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78024***78024***

Page 3

December-23-11 10:04:58 AM

Item ID: D212-664-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 23/12/2011 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/01/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

150 Crosstubes Chemical Conversion

0.00

150

HandFXtube

Memo

0.00

Hand Finishing Crosstubes

Chemical Conversion Coat within 24 hours of bending and drilling

MO

11-12-29

160

QC5- Inspect part completeness to step on W/O

0.00

160

QC

Memo

0.00

Quality Control

8-11-2129

(u)

170

Outsource process - NDT per QSI038 4.1

0.00

170

Outsource2

Memo

0.00

Outsource process - NDT

Liquid Penetrant Inspection as per QSI 038

Issue P/O: 15757

LPI as per ASTM 1417 Level 2

Attach copy of NDT results to work order

11-12-29

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78024***78024***

Page 4

December-23-11 10:04:58 AM

Item ID: D212-664-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 23/12/2011 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/01/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	Receive & Inspect for Damage & Mat'l Certs	0.00							
180	Packaging								
Packaging	Memo	0.00							
Packaging	Ensure copy of NDT results attached to work order.								
190	QC5- Inspect part completeness to step on W/O	0.00							
190									
QC	Memo	0.00							
Quality Control	Inspect for damage & ensure results are as per Dwg D212-664-141								

u 11.12.29

5 11.12.29

(H)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78024

December-23-11 10:04:58 AM

78024

Page 5

Item ID: D212-664-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Fwd

Start Date: 23/12/2011 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/01/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

200

Spray Painting per QSI005 4.2

0.00

200

SprayPaint

Memo

0.00

Spray Painting

1-Prime inside and outside crosstube as per QSI 005 4.2

2-Paint outside crosstube as per DEO D212-667-141 with White Imron as per QSI 005 4.2

PRIME:

Start Time: 7:30Finish Time: 9:30

WJ/AA 12-01-02

PAINT:

Start Time: 7:15Finish Time: 9:30

WJ/AA 12-01-03

210

QC14- Inspect Spray Paint

0.00

210

QC

Memo

0.00

Quality Control

Then, Wrap in plastic bag to protect from scratches

D B 12-01-04

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024

Page 6

N900040100

Setup Start *NS1*

Stop *NS2*

Start Date: 23/12/2011 **Start Qty:** 1.00 ***1***

Cust Item ID:

Required Date: 17/01/2012 **Req'd Qty:** 1.00 *** 1 ***

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

0.00

220

Crosstubes

0.00

Crosstubes

Crosstubes

Memo

1-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe

2-Install supports with Proseal 890 per DSI9563 and QSI 015
A/R Proseal 890 Batch: 119396

3- Torque bolts as per dwg

230

QC6- Inspect dimensions to drawing

0.00

230

QC

Memo

0.00

Quality Control

240

Pick Kit

0.00

240

Packaging

Memo

0.00

Packaging

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78024

December-23-11 10:04:58 AM

78024

Page 7

Item ID: D212-664-101 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Crosstube Fwd
 Start Date: 23/12/2011 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 17/01/2012 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

250	QC4- 100% Inspect kits for completeness	0.00							
250									
QC	Memo	0.00							
Quality Control									

260	Packaging	0.00							
260									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D212-664-101								

270	QC21- Final Inspection - Work Order Release	0.00							
270									
QC	Memo	0.00							
Quality Control									

12/11/12

MF
12-01-11

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

December-23-11 10:05:02 AM

Page 1

Work Order ID: 78024

78024

Parent Item: D212-664-101

D212-664-101

Parent Item Name: Crosstube Fwd

Start Date: 23/12/2011

Required Date: 17/01/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:E04.02.16ReformatKJ/DS
 IPP Rev:F 06-03-29 Remove Coments on Pick List JLM
 IPP Rev:G 07-04-30 As per Rev C JLM IPP Rev:H
 11.04.26 inspection strip ecn 11-549 EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D212-664-101TRN		Manufactured	No			110	Each	2.0000	1	1			

D212-664-101TRN

Crosstube Turning Detail

**

Location	Loc Qty	Loc Code
LG	2	
77416	1	
77418	1	

D3595-063-450

Manufactured No

230 Each

74.1095

4

4.210526

D3595-063-450

RUBBER CUSHION

**

Location	Loc Qty	Loc Code
MAT052	74.109474	
67353	2	
68893	6	
70113	0.56	
71354	0.2	
74113	0.349474	
75597	65	

4

MO 11-12-28

12-01-10

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

December-23-11 10:05:02 AM

Page 2

Work Order ID: 78024

Parent Item: D212-664-101

Parent Item Name: Crosstube Fwd

78024

D212-664-101

Start Date: 23/12/2011

Required Date: 17/01/2012

Start Qty: 1.00

Required Qty: 1.00

MS21920-25

Purchased

No

220

Each

76.0000

4

4

MS21920-25

Clamp(per MIL-DTL-8783C)

**

Location

Loc Qty

Loc Code

LG050

76

116264

2

117998

4

118142

4

119339

2

119746

14

120054

50

4

1A2 12-01-10

D2893-1

Manufactured

No

220

Each

5.0000

2

2

D2893-1

2.75 Support

**

*77606

Location

Loc Qty

Loc Code

LG052

5

72865

2

76250

1

76928

2

2

1A2 12-01-10

D3428-1

Manufactured

No

240

Each

17.0000

1

D3428-1

Placard

**

Location

Loc Qty

Loc Code

ST053

17

76508

17

240

Each

28.0000

4

4

AN6-35A

Purchased

No

AN6-35A

BOLT

**

Location

Loc Qty

Loc Code

ST342

28

119749

28

December-23-11 10:05:02 AM

Shop Packet Print

Page 2

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

December-23-11 10:05:02 AM

Work Order ID: 78024

78024

Parent Item: D212-664-101

D212-664-101

Parent Item Name: Crosstube Fwd

Start Date: 23/12/2011

Required Date: 17/01/2012

Start Qty: 1.00

Required Qty: 1.00

AN6-36A

Purchased

No

240

Each

40.0000

4

4

AN6-36A

Bolt

**

Location

Loc Qty

Loc Code

ST342

40

118422

2

119449

1

119749

37

MS21042L6

Purchased

No

240

Each

1,236.000

6

6

MS21042L 6

Nut

**

Location

Loc Qty

Loc Code

ST300

1236

117677

25

118384

5

118927

48

118968

108

119075

1000

119736

50

AN960JD616

NAS1149D0663J

Purchased

No

240

Each

0.0000

18

18

AN960JD616

Washer

**

m119075

12/1/11

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

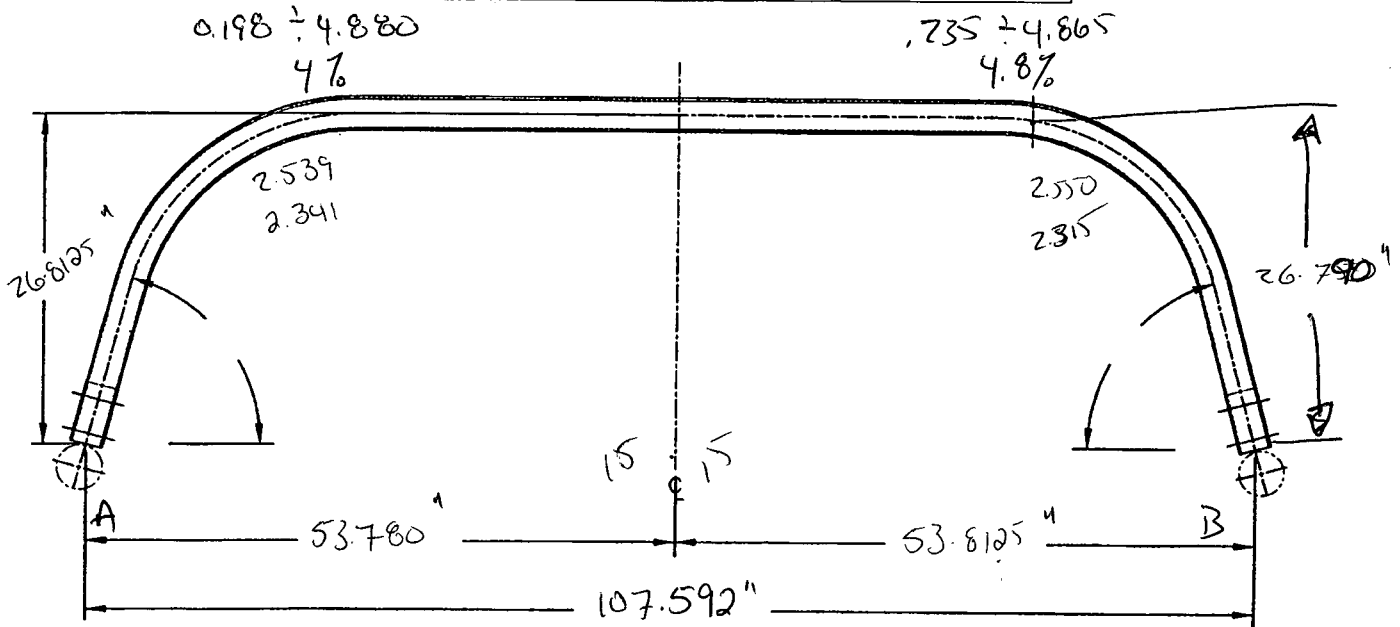
Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

DART AEROSPACE LTD		Work Order: 78024
Description: Crosstube High Fwd (205/212/412)		Part Number: D212-664-101
Inspection Dwg: D212-664-141 Rev: D		Page 1 of 1

Required Dimension	Min	Max
Height	26.79	27.05
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.7



Comments
Since A = 4.7% crushing @ 15 passes
Since B = 4.8% crushing @ 15 passes

QC15 Inspection	J
Date	11/2/28

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	07.05.31	Dimensions updated per Dwg Rev C	KJ/JM	
C	10.04.01	Dwg Rev updated	KJ	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Item	Qty -141	Qty -141B	Part Number	Description
1	X		D212-664-141	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD)
2		X	D212-664-141B	CROSSTUBE ASSEMBLY (214 HIGH FWD)
3	1	1	D6005-128	CROSSTUBE
4	2	2	D2893-1	SUPPORT
5	4	4	D3595-063-450	RUBBER CUSHION
6	4	4	MS21920-25	CLAMP (OR MS21920-26)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

- MATERIAL: MANUFACTURED FROM D6005-128
FINISHED LENGTH = 126.514±0.020
- FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- UNITS: INCHES UNLESS OTHERWISE NOTED.
- BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF
USING VIBRATING STYLUS
- WEIGHT: D212-664-141 = 33.6 lbs (PER IIN-D212-664)
D212-664-141B = 33.6 lbs (PER IIN-D212-664)
- PART IS SYMMETRIC ABOUT CENTERLINE.
- RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY. TRANSITION SHOULD BE SMOOTH.
- BEND PROGRESSIVELY WITH A MINIMUM OF 3 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS
6% BASED ON O.D.
- LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF
D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER
INSTALLATION AND PRIOR TO PACKAGING.
- INSTALL MS21920-25 CLAMPS (OR -26) WITH D3595-063-450 RUBBER CUSHIONS TO SECURE THE D2893-1
SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE
SUPPORT.
- EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE
SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR
DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND
MARKS ARE UNACCEPTABLE.
- TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT
HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER

NO. 7-8024 H.C.J. 11/12/23
REMOVED FROM UNDER REVIEW FOR
UNDER REVIEW ECN# 11-614
FOR PRO-SEALING SUPPORT

DEO ATTACHED

RELEASED
2009-10-29

D	REFORMAT/REVISE GENERAL NOTES/PART LIST; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD -141B (ZN B4-2, D4-2); REMOVED REF & ADD TOLERANCES (ZN B4-3, C6-3, C8-3 & B6-3); RELOCATED FLAG #6 PER PAR 09-046 (ZN A5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4	RF	09.09.30
C	REMOVE -851 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	97	DRAWING NO.	REV. D
MFG. APPR.	DS	D212-664-141	SHEET 1 OF 4
APPROVED	140	TITLE	SCALE
DE APPR.	TH	XTUBE ASSY (205/212/412 HI FWD)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

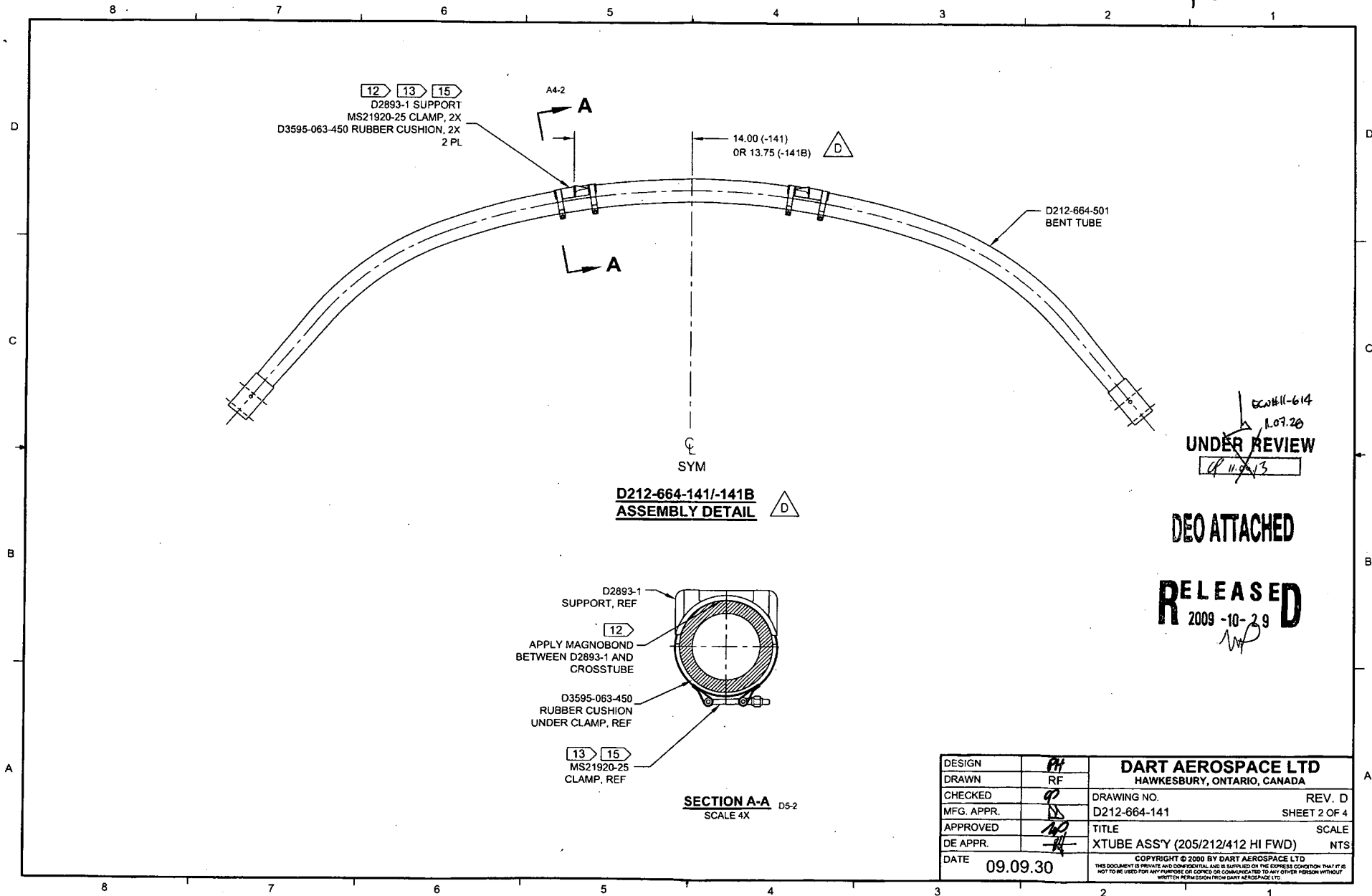
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

70024



ECN#11-614
1.09.28
UNDER REVIEW
11.09.13

DEO ATTACHED

RELEASED
2009-10-29

DESIGN	PH	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	97	DRAWING NO.	REV. D
MFG. APPR.	11	D212-664-141	SHEET 2 OF 4
APPROVED	11	TITLE	SCALE
DE APPR.	11	XTUBE ASS'Y (205/212/412 HI FWD)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

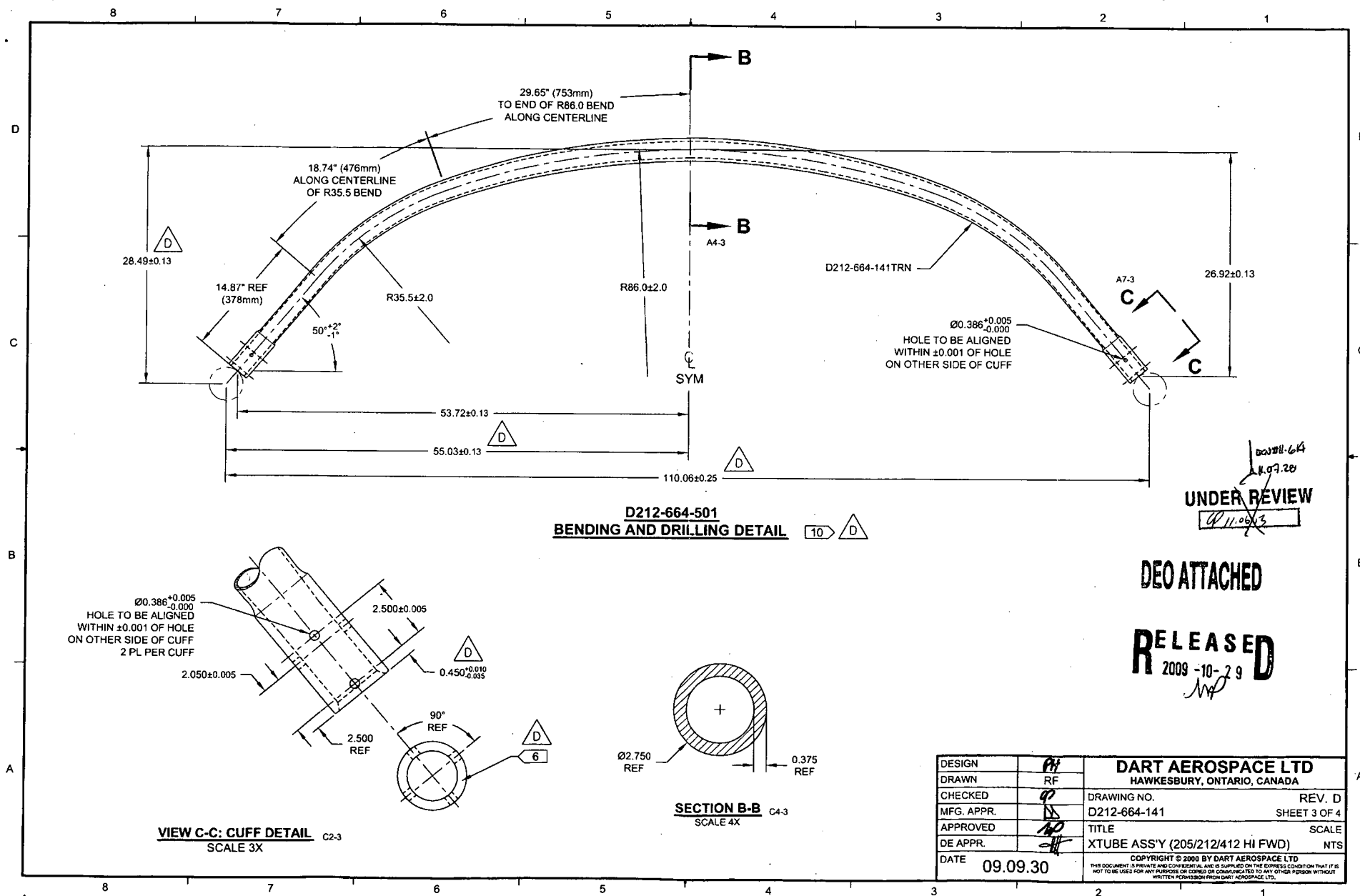
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024



W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

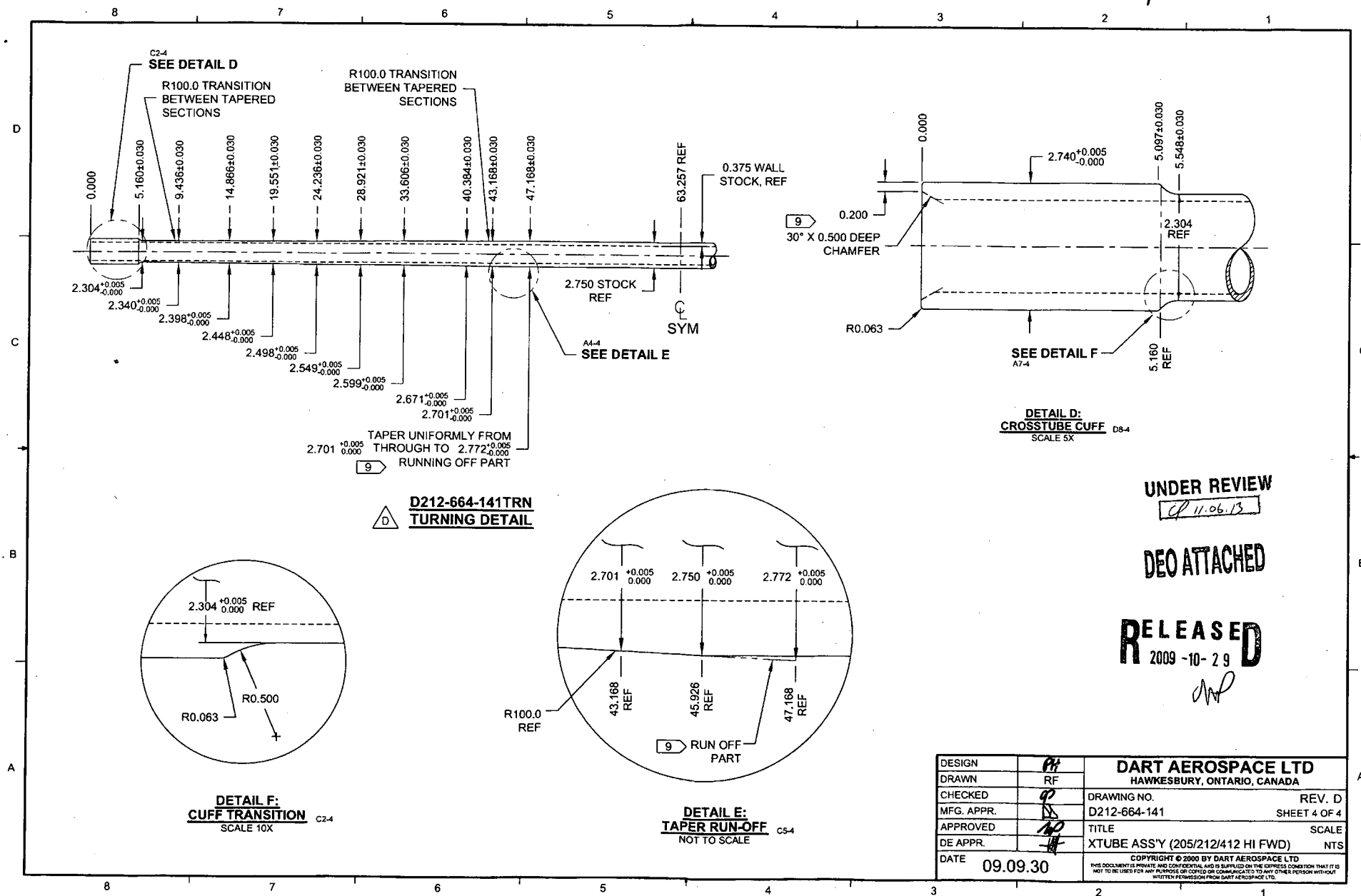
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024



W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED <i>UP</i>	MFG. APPR. <i>ER</i>	APPROVED <i>MP</i>		DE APPR. <i>MP</i>		
DATE 11.04.07	DATE 11.07.11	DATE 11.04.12	DATE 11/04/12		DATE 11.04.12		

PURPOSE:

ADD AN INSPECTION WINDOW TO UNDERSIDE OF CROSSTUBE.

CHANGE:

NOTES 2 OF SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND
PAINT OUTSIDE PER DART QSI 005 4.2
REMOVE MASKING AND APPLY CLEAR COAT

WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2

RELEASED
2011-04-18

UNDER REVIEW

14/05.13
12 00511-614
11.07.28

COPYRIGHT © 2011 BY DART AEROSPACE LTD

THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS
NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE LTD.

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN	CHECKED <i>CP</i>	MFG. APPR. <i>E</i>	APPROVED <i>WPD</i>	DE APPR. <i>[Signature]</i>		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

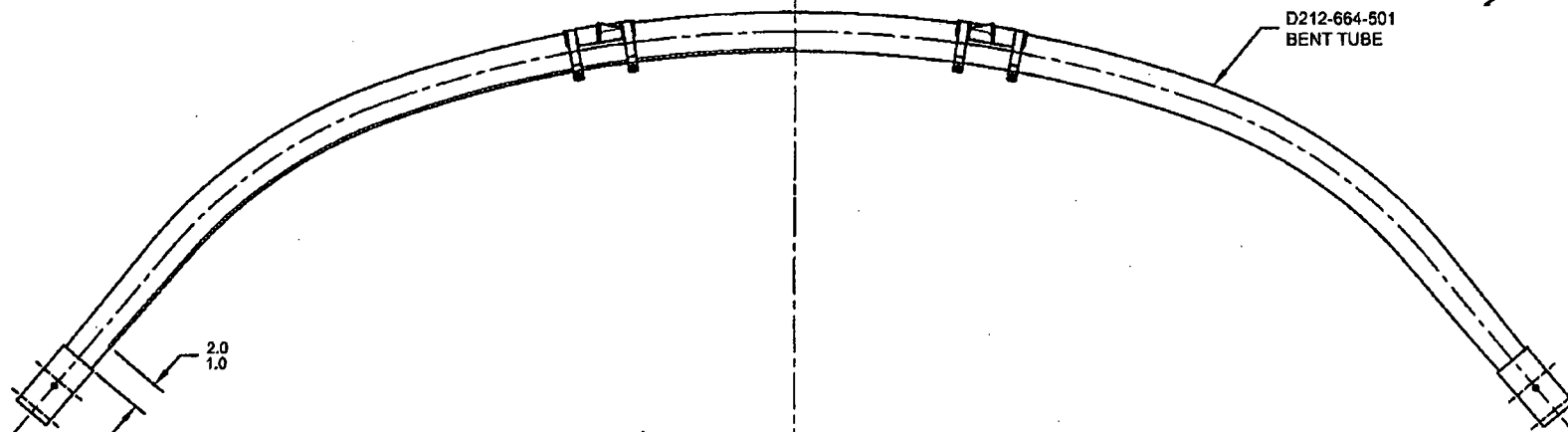
IS:

WAS:

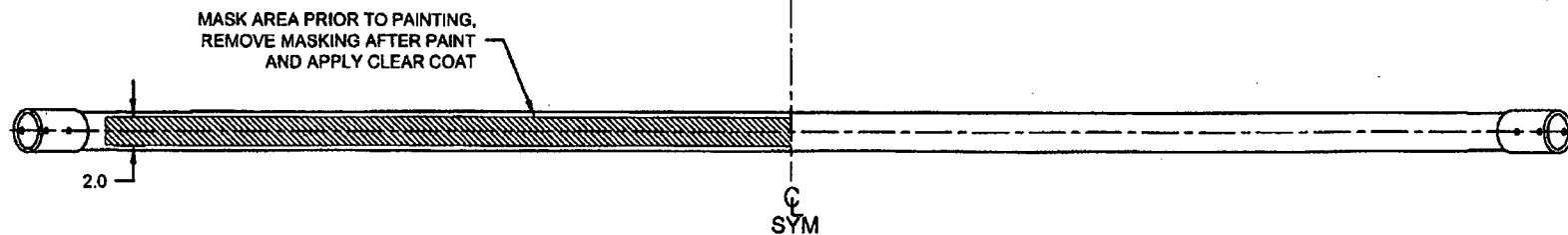
UNDER REVIEW

CP 11/06/13

*ECN# 11-614
11.07.28*



D212-664-141/-141B
ASSEMBLY DETAIL



COPYRIGHT © 2011 BY DART AEROSPACE LTD
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78024

DRAWING NO. D212-664-141	TITLE CROSSTUBE ASS'Y (205 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-141-D-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>UP</i>	CHECKED <i>ADS</i>	MFG. APPR. <i>AB</i>	APPROVED <i>MD</i>		DE APPR. <i>HT</i>		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/07/21		DATE 11.07.21		

PURPOSE:

REPLACE MAGNOBOND WITH PROSEAL.

CHANGE:

IS:

Item	Qty -141	Qty -141B	Part Number	Description
7	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2893-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RECEIVED
2011-07-28

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries



Client:

Client: Port Adelaide

Contact: CHARTAL

Location: 1270 1st Ave NW, Alaska

Description: cat. 100 on glass plate

Report #'s: As Follows

E-44217

Form dated Sep 2005

Job #: - 11 - 12345678

Day: Sun Mon Tues

P.O. #: _____

Vehicle # 637

Date: Dec 29 - 2017

Wed Thurs Fri Sat

W.O.# _____

Camera #: 1

[illegible]


RADIOGRAPHIC UNIT PRICING

[illegible]

Film: _____ Pcs. 2 3/4 x 17"
 _____ Pcs. 3 1/2 x 17"
 _____ Pcs. 4 1/2 x 17"
 _____ Pcs. 14" x 17"
 _____ Pcs. _____

Consumables: _____

Equipment: _____

Client Representative: ☒ 

Client Representative: X Phillips

Place a check mark in each safety check area as completed

C/C	CAMERA CHECK
S/E	SAFETY EQUIPMENT CHECK
S/C	SURVEY METER CHECK
B/S	BARRRIER & SIGN INSTALLED
C/L	CAMERA LOCKED & SECURELY STORED
C/S	CAMERA SURVEYED AFTER EACH USE

EXPENSES

NOTES 5 clots in 658
W.O.*'s, 77536, 77535, 77748
77128, 77103
Machined Parts - W.O.* 77128
77103

Oakville	(905) 825-8595 • Fax (905) 825-8598
Sarnia	(519) 336-3021 • Fax: (519) 336-8220
Sudbury	(705) 522-1849 • Fax (705) 522-9926
Halifax	(902) 497-3870 • Fax (902) 445-5090
North Bay	(705) 840-8107 • Fax (705) 476-6683
Val D'Or	(819) 856-6789 • Fax (819) 825-9564

ACUREN 1-877-299-2857

Cambridge	(519) 622-3112 • Fax (519) 622-1326
Cornwall	(613) 931-1261 • Fax (613) 931-2777
Saint John	(506) 847-0194 • Fax (506) 847-0194
Thunder Bay	(807) 475-4240 • Fax (807) 577-2017
Gaspé	(418) 392-3618 • Fax (418) 392-4114
Hull	(819) 360-0685 • Fax (819) 827-3513



LIQUID PENETRANT TEST REPORT

12248

PAGE 1 OF 1

CLIENT DENT AEROSPACE DATE FEB 24 2011 TIME AM ☒ PM ☐
ATTENTION CHANAN ACUREN JOB NO. 188-11-1
ADDRESS 1270 A/B/D DEER PO/WO No. -
HAWKESBURY, ON WORK LOCATION SCHE
ACCEPTANCE STD. ASTM 147/05-038 REV./DATE 2005
PROJECT FPI on FIVE CROSS TUBES
ITEM(S) EXAMINED 3 ENGINE MOUNTS

JOB DESCRIPTION PROCEDURE NO. LT 002 REV./DATE 2008 TECHNIQUE NO. LT 2 REV./DATE 2008
PART NO. SEE RESULTS MATERIAL ALUMINE ALUMINUM THICKNESS VARIABLES
SCOPE A WET FLUORESCENT LIQUID PENETRANT INSPECTION CARRIED OUT ON 100% EXTERNAL SURFACE

TEST DETAILS

METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND MAGNA FLUX BLACK LIGHT S/N 16459 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT 2607 MINIMUM DWELL TIME 15 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H2O MINIMUM DRY TIME >10 MIN. OTHER LABINO
DEVELOPER SKD52 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N 1098866 CAL DUE DATE FEB 02
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE

SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☐ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < -4°C/ 20°F ☐ -4°C/ 20°F TO 10°C/ 50°F ☒ 10°C/ 50°F TO 52°C/ 125°F ☐ > 52°C/ 125°F

RESULTS- (☐ METRIC ☐ IMPERIAL)

1 CROSS TUBE W.O. 77536 ✓
1 CROSS TUBE W.O. 77535 ✓
1 CROSS TUBE W.O. 77748 ✓
1 ENGINE MOUNT W.O. 77128 ✓
2 ENGINE MOUNT W.O. 77103 ✓
1 CROSS TUBE W.O. 78023 ✓
1 CROSS TUBE W.O. 78024 ✓

WELD REGROUND x (2)

u1/2/79

Scope of Services

The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care

In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES

CLIENT REPRESENTATIVE Andrew Sheldon DTR # E44217
TECHNICIAN (SIGNATURE): [Signature] REPORT REVIEWED BY: [Signature]
NAME (PRINT): Mike Johnston NAME INITIALS
1ST TECHNICIAN 2ND TECHNICIAN
CGSB LEVEL 2 SNT LEVEL 2 CGSB LEVEL 2 SNT LEVEL 2
CGSB REG. No 6000 CGSB REG. No 6000